

POV STUDENT INFORMATION SHEET

This Student Information Packet contains important information for you, as well as documents that must be signed and returned to us within 3 business days. Your prompt attention will eliminate unnecessary attempts to contact you regarding these documents.

Bring this packet and all documents with you to Inprocessing on the day you arrive.

Upon completion of your training, you may be entitled to reimbursement. If you are entitled to reimbursement and you do not receive a reimbursement check within six weeks after completion of training, please contact the Help Line at 1-800-310-3169.

If you have any questions regarding your travel arrangements, please call the Travel Supervisor at 1-866-213-9549.

TRAVEL SERVICES SUPERVISOR

October 2010



Requirements Letter

Congratulations on your selection to attend training at the Center for Domestic Preparedness (CDP) in Anniston, Alabama. The purpose of this letter is to provide you with necessary information regarding CDP training requirements. Furthermore, this letter serves as an acknowledgement of your willingness to participate in training and your agreement to adhere to CDP campus policy introduced in your Student Handbook. Please read this letter carefully and then sign and date confirming your understanding and agreement:

I understand that CDP training includes but is not limited to the following requirements:

- Completion of all training objectives and a passing score on tests and assessments is required to earn a course Certificate of Completion. Missing more than 10% of training or unsatisfactory tests/assessments results in a Letter of Attendance.
- Completion of homework assignments, if assigned, is mandatory.
- CDP medical screening prior to participating in advanced hands-on components of training is required.
- You are required to conduct yourself professionally while on the CDP campus and in the surrounding communities; misconduct will be reported to your agency.

Training may require physical activity that may include but is not limited to the following:

- Wearing Personal Protective Equipment (PPE) Levels A, B, or C, during exercises.
- Wearing PPE Level C during a toxic agent environment practical exercise at the COBRA Training Facility.
- Dragging/lifting full-weight mannequins during extrication/cut-out scenarios.
- Operating various types of emergency response equipment.

I also understand that, in the event I require medical treatment for injury or illness (to include any pre-existing medical condition) while attending CDP training, my personal medical information may be released on a limited basis to CDP safety, emergency management, and senior administrative officials with a need to know, strictly for the purpose of facilitating my medical care or to prevent injury/illness to other students and/or staff members.

I do not object to the CDP taking photos of my likeness during training and potentially using the images in training and outreach material. I understand that it is my responsibility to alert the CDP photographer if I object to the taking of my photo.

Should you have questions or desire additional information about training offered at the CDP, please visit <http://cdp.dhs.gov> or contact us at 1-866-213-9551 or 256-847-2072. Please print, sign, and date below, acknowledging receipt of this letter and understanding of your responsibilities and requirements for training at the CDP. Then fax this document and the General Release and Agreement to 256-231-5555, alternate 256-847-2222.

Name: Print

Signature

Date

Note: If for any reason you **CAN NOT** attend training, call the number below as soon as possible. Please **do not** call the travel agency.

IMPORTANT INFORMATION

PLEASE READ CAREFULLY

Attached to this memo is a **GENERAL RELEASE AND AGREEMENT** form and a **CDP REQUIREMENTS LETTER**. Please read, complete and sign these forms. **Confirm your attendance at this course by faxing or emailing a signed copy of the General Release form and the CDP Requirements Letter to the Center for Domestic Preparedness within 3 business days.** You must provide the CDP with the original signed copy upon your arrival at the center.

Fax numbers are: Primary (256) 231-5555

Alternate (256) 847-2222

Email address: traveloffice@cdpemail.dhs.gov

If you have any question concerning this form please call:
(256) 847-2213

Thank you for timely assistance in this matter.

NOTE I: The witness can be your supervisor or co-worker.

NOTE II: Please use the reverse side of this form to fax back your General Release and Agreement form to the Center.

Note: If for any reason you **CAN NOT** attend training, call the number above as soon as possible. Please **do not** call the travel agency.

FAX

TO: Center for Domestic Preparedness (Training and Education)

FROM: _____

FAX #: (256) 231-5555

ALTERNATE: (256) 847-2222

DATE: _____

PAGES: 4

Comments:

IMPORTANT INFORMATION

PLEASE READ CAREFULLY

Attached to this memo is an **AUTHORIZATION TO RELEASE PRIVILEGED MEDICAL RECORD INFORMATION** Form and a **MEDICAL QUESTIONNAIRE**.

Please read, complete both forms and sign Medical Release only. You **must** bring the completed *original signed copy* with you to the Center (**do not fax forms**). Forms will be collected on the first day of training.

If you have any questions concerning this form, please call (256)847-2132/2072 or 1-866-213-9553

Thank you for assistance in this matter.

NOTE: The witness can be your supervisor or co-worker.

COBRA TRAINING FACILITY

RESPIRATORY MEDICAL EVALUATION QUESTIONNAIRE

1. PURPOSE:

To ensure that you do not have any medical or respiratory conditions which would place you at increased risk during training, IAW 29 CFR 1910.134 App. C ; OSHA Respirator Medical Evaluation Questionnaire.

2. PATIENT IDENTIFICATION INFORMATION:

Date: _____

Name (please print)_____

Student Identification Number (SID): _____

Age: _____ Sex: _____ Work Telephone Number: _____

HT: _____ WT: _____

EMPLOYER:

Class Number: _____

Reviewed By: _____

FOR OFFICIAL USE ONLY

The Privacy Act of 1974, 5 U.S.C. 552A, Prohibits unauthorized release of personal data contained herein.

Routine use of the information may be used to carry out follow-up evaluations. The unauthorized disclosure of information this form could result in a violation of an individual's right to privacy. Minimum security measures require that the information contained herein be used only by authorized persons in the conduct of official business. Unauthorized disclosure of personal information, to any person not entitled to receive it, may result in a fine not more than \$5000.

COBRA TRAINING FACILITY

RESPIRATORY MEDICAL EVALUATION QUESTIONNAIRE

PLEASE MARK "YES" OR "NO" TO THE FOLLOWING QUESTIONS:

1. Can you read? _____YES _____NO
2. Have you worn a respirator, SCBA, gas mask, or
Powered Air Purifying Respirator (PAPR) _____YES _____NO
If yes, what kind: _____
3. Do you currently smoke tobacco, or have you smoked
tobacco in the last month? _____YES _____NO
4. Do you have any of the following conditions?
 - a. Seizures (fits) _____YES _____NO
Any limitations or restrictions? _____YES _____NO
Describe any limitations or restrictions _____
 - b. Diabetes (sugar disease) _____YES _____NO
 - c. Allergic reactions that interfere with your breathing? _____YES _____NO
Describe _____
 - d. Claustrophobia (fear of closed-in places) _____YES _____NO
 - e. Heat injury in past 12 months? _____YES _____NO
 - f. Heat Stroke _____YES _____NO
 - g. Frequent fainting episodes? _____YES _____NO
 - h. Deep cuts or sutures? Date _____ _____YES _____NO
 - i. Trouble smelling odors? _____YES _____NO
 - j. Myasthenia gravis _____YES _____NO
5. Have you ever had any of the following pulmonary or lung problems?
 - a. Asbestosis _____YES _____NO
 - b. Asthma _____YES _____NO
Childhood only? _____YES _____NO

- c. Chronic bronchitis _____ YES _____ NO
- d. Pneumonia Date _____ _____ YES _____ NO
- e. Emphysema _____ YES _____ NO
- f. Tuberculosis _____ YES _____ NO
- g. Silicosis (inhalation of silica/quartz dust) _____ YES _____ NO
- h. Pneumothorax (collapsed lung) Date _____ _____ YES _____ NO
- i. Lung cancer _____ YES _____ NO
- j. Broken ribs Date _____ _____ YES _____ NO
- k. Any chest injuries? Date _____ _____ YES _____ NO
- l. Any chest surgery(s) _____ YES _____ NO
- What procedure(s) _____ Date _____
- Any limitations or restrictions? _____ YES _____ NO
- Describe any limitations or restrictions _____
- m. Any other lung problem that you've been told about _____ YES _____ NO
- Describe _____
6. Do you **currently** have any of the following symptoms of pulmonary or lung illness?
- a. Shortness of breath _____ YES _____ NO
- b. Shortness of breath when walking fast on level ground or walking up a slight hill or incline _____ YES _____ NO
- c. Shortness of breath when walking with other people at an ordinary pace on level ground _____ YES _____ NO
- d. Have to stop for breath when walking at your own pace on level ground _____ YES _____ NO
- e. Shortness of breath when washing or dressing yourself _____ YES _____ NO
- f. Shortness of breath that interferes with your job _____ YES _____ NO
- g. Coughing that produces phlegm (thick sputum) _____ YES _____ NO

- h. Coughing that wakes you early in the morning _____ YES _____ NO
- i. Coughing that occurs mostly when you are lying down _____ YES _____ NO
- j. Coughing up blood in the past month _____ YES _____ NO
- k. Wheezing _____ YES _____ NO
- l. Wheezing that interferes with your job _____ YES _____ NO
- m. Chest pain when you breathe deeply _____ YES _____ NO
- n. Any other symptoms that you think may be related to lung problems _____ YES _____ NO

7. Have you ever had any of the following cardiovascular or heart problems?

- a. Heart attack _____ YES _____ NO
- b. Stroke _____ YES _____ NO
- c. Angina _____ YES _____ NO
- d. Heart failure _____ YES _____ NO
- e. Swelling in your legs or feet (not caused by walking) _____ YES _____ NO
- f. Heart arrhythmia (heart beating irregularly or skipping a beat) Date _____ _____ YES _____ NO

Any limitations or restrictions?

_____ YES _____ NO

Describe any limitations or restrictions _____

- g. High blood pressure _____ YES _____ NO

- h. Any other heart problem that you've been told about _____ YES _____ NO

Describe _____

Any limitations or restrictions?

_____ YES _____ NO

Describe any limitations or restrictions _____

8. Have you ever had any of the following cardiovascular or heart symptoms?

- a. Frequent pain or tightness in your chest _____ YES _____ NO
- b. Pain or tightness in your chest during physical activity _____ YES _____ NO

c. Pain or tightness in your chest that interferes with your job _____YES _____NO

d. Heartburn or indigestion not related to eating _____YES _____NO

Describe _____

e. Any other symptoms that you think may be related to heart or circulation problems _____YES _____NO

9. Do you currently take medication for any of the following problems?

a. Breathing or lung problems _____YES _____NO

b. Heart trouble _____YES _____NO

c. Blood pressure _____YES _____NO

d. Seizures (fits) _____YES _____NO

e. Other medical problems _____YES _____NO

10. LIST all medications:

Name of Medication	Dosage	Frequency

11. If you've used a respirator, have you ever had any of the following problems? If you have never used a respirator, check the following space and go to Question 12 _____

a. Eye irritation _____YES _____NO

b. Skin allergies or rashes _____YES _____NO

c. Anxiety _____YES _____NO

d. General weakness or fatigue _____YES _____NO

- e. Hyperventilation in mask _____ YES _____ NO
- f. Any other problems that interfere with your use of a respirator _____ YES _____ NO
12. Have you ever lost vision in either eye (temporarily or permanently)? Date _____ _____ YES _____ NO
- Describe _____
- Any limitations or restrictions? _____ YES _____ NO
- Describe any limitations or restrictions _____
13. Do you currently have any of the following vision problems?
- a. Wear contact lenses _____ YES _____ NO
- b. Wear glasses _____ YES _____ NO
- c. Color blind _____ YES _____ NO
- d. Any other eye or vision problems Date _____ _____ YES _____ NO
- Describe _____
- Any limitations or restrictions _____ YES _____ NO
- Describe any limitations or restrictions _____
14. Have you ever had an injury to your ears, including a broken eardrum? Date _____ _____ YES _____ NO
- Describe injury _____
15. Do you currently have any of the following hearing problems?
- a. Difficulty hearing _____ YES _____ NO
- b. Wearing a hearing aid _____ YES _____ NO
- c. Any other hearing or ear problems _____ YES _____ NO
- Describe _____
16. Have you ever had a back injury? Date _____ _____ YES _____ NO
- Any limitations or restrictions? _____ YES _____ NO

Describe any limitations or restrictions _____

17. Do you currently have any of the following musculoskeletal problems?

- a. Weakness in any of your arms, hands, legs, or feet _____ YES _____ NO
- b. Back pain _____ YES _____ NO
- c. Difficulty fully moving your arms and legs _____ YES _____ NO
- d. Pain or stiffness when you lean forward or backward at the waist _____ YES _____ NO
- e. Difficulty moving your head up or down _____ YES _____ NO
- f. Difficulty moving your head from side to side _____ YES _____ NO
- g. Difficulty bending at your knees _____ YES _____ NO
- h. Difficulty squatting to the ground _____ YES _____ NO
- i. Climbing a flight of stairs or ladder carrying more than 25 lbs _____ YES _____ NO
- j. Any other muscle or skeletal problem that interferes with wearing a respirator _____ YES _____ NO
- k. Do you NORMALLY wear any form of back brace or other form of brace or prosthesis? _____ YES _____ NO

Describe _____

18. Are you pregnant? _____ YES _____ NO _____ NA

19. Do you have any other medical problems not mentioned on this questionnaire? _____ YES _____ NO

Describe _____

20. Are you limited or restricted for any medical issues? _____ YES _____ NO

Describe _____

21. Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire? _____ YES _____ NO



FEMA

TO: Center for Domestic Preparedness
61 Responder Drive
Anniston, AL 36205

AUTHORIZATION TO RELEASE PRIVILEGED MEDICAL RECORD INFORMATION

I hereby authorize and request the Center for Domestic Preparedness to furnish medical information concerning my training to my private physician and/or health-care provider or institution.

Print or type:

Physicians and/or practice name: _____

Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: (_____) _____ - _____ Fax: (_____) _____ - _____

Electronic Mail: _____ @ _____

This information will be used to convey your past medical history and any medical problem or concern(s) that arose from or was discovered during your training while in Anniston, Alabama. I also understand that, in the event I require medical treatment for injury or illness (to include any pre-existing medical condition) while attending CDP training, my personal medical information may be released on a limited basis to CDP safety, emergency management, and senior administrative officials with a need to know, strictly for the purpose of facilitating my medical care or to prevent injury/illness to other students and/or staff members.

I understand that these records may contain confidential remarks furnished by me, the Medical Staff and the Physician. I also understand that my medical records may contain information concerning any drug and/or alcohol use and/or psychiatric condition.

I further agree to release and hold harmless the Department of Homeland Security, Center for Domestic Preparedness and/or its federal or contracted medical staff from all liability that may arise from the release of the information herein requested.

Print Patient Name

Signature of Patient

Student ID Number (SID)

Witness

Date

Date

CDP MENU by ADRS/SODEXHO

Revised October, 2010

DAILY BREAKFAST FEATURES (Employee cost \$4.00/federal cost \$9.00)

Scrambled eggs, bacon, sausage, sausage gravy or creamed beef, hash browns, grits, oatmeal, fresh fruit, cold cereal, assorted breads, pastries, biscuits, milk, coffee, sodas, fruit juices, hot tea

MONDAY:	Omelets to order	THURSDAY:	Pancakes
TUESDAY:	Belgian Waffles	FRIDAY:	French Toast
WEDNESDAY:	Eggs to order	SATURDAY:	Chef's choice

DAILY LUNCH FEATURES: (Employee cost posted/federal cost \$10.00)

Individual garden salads, pasta, potato, chicken, seafood salad, fruit cups, asst. deli sandwiches with appropriate condiments, topped off with dessert bars and on Wednesday, Miss Minnie's banana pudding!

MONDAY:	Southern fried flounder filet, 6oz. Marinated pepper bourbon tri-tip steak, Redskin potatoes with Julian bell peppers and onions, Green beans, and a Bahama vegetable blend.
TUESDAY:	Spaghetti and meatballs, Chicken breast in a creamy mushroom sauce over pasta, Broccoli spears, Chuck-wagon corn, & garlic bread (Box lunch: chicken breast sandwich)
WEDNESDAY:	Hamburger, Fried butterfly shrimp, Potato logs, Baked beans, Laguna vegetable blend. (Box lunch ham and cheese sandwich)
THURSDAY:	Southwest crested baked chicken, 6oz Grilled Salisbury steak, Herbal wild rice, Chicken gravy, California blend vegetables, Baby butter beans (Box lunch: turkey sandwich)
FRIDAY:	5oz .Seared roasted garlic and herb tilapia, 7 oz. Fried chicken breast, Macaroni and cheese, Navy beans and a Pacific vegetable blend (Box lunch: Club sandwich)

Vegetarian selections: Vegetarian hamburger, vegetarian Salisbury, vegetable pasta, Alfredo and marinara sauce, baked fish, baked chicken breast

Box lunch condiments: Dill pickle, pudding or dessert bar, lettuce, tomato, fruit cup, potato chips, Gatorade, soda, water

DAILY DINNER FEATURES: (Employee cost \$8.00/federal cost \$15.00)

Fresh salad bar, homemade breads, assorted desserts, ice-cream bar, fresh fruit, coffee, tea, soda, punch, lemonade

SUNDAY:	Hickory smoked marinated pork loin, southern fried chicken, sweet potato casserole, steamed rice, brown gravy, pinto beans, turnip greens, cornbread and homemade rolls
MONDAY:	Carved roast beef au-jus, marinated lemon pepper grilled chicken breast, rice pilaf, mashed potatoes and gravy, cauliflower, green peas, homemade rolls
TUESDAY:	Carved turkey breast with cranberry sauce, grilled chopped sirloin with sautéed onions and mushrooms, buttered parsley potatoes, cornbread dressing, buttered corn, Brussels sprouts, homemade rolls
WEDNESDAY:	Carved honey baked ham, potato crested cod fillets with herbal butter, macaroni and cheese, green beans, fried okra, homemade rolls
THURSDAY:	<i>Thuba's Lasagna</i> , Italian sausage with assorted peppers and onions, scalloped potatoes, broccoli spears, buttered carrots, pasta tossed to order with Alfredo or marinara sauce, garlic bread, homemade rolls
FRIDAY:	Hickory smoked carved barbecue pork spare ribs, southern fried catfish, fried rice, baked potato, mixed vegetables, coleslaw, hushpuppies, homemade rolls

Please review the menu on reverse side, and if you have a special Dietary requirement that is not met by this menu, please inform our Executive Chef, Andy Quinn in advance of your training by phone at 256-741-3416, or complete this form and fax to (256) 231-5541. Also, please don't forget to identify yourself on arrival day, to the Food Service Supervisor on duty so that we may meet your needs and make your meals and stay as pleasant and conducive to training as possible.

Circle each of the following that pertain to you:

(YES) I am a Vegetarian

(YES) I have the following requirements. (Such as allergies, lactose intolerant, diabetic, sodium restricted, etc.)

Please specify here: _____

For lunch we offer a variation of salads such as Spring Mix, Pasta, Tossed, Chicken, Potato, and Seafood salads, Cole Slaw, and Fruit Cups. For dinner, we offer a complete salad bar with all the trimmings.

To further accommodate your special dietary needs, we also offer a selection of special dietary entrees listed below. Please make your selection by circling one lunch and one dinner entrée preference (per day) on the appropriate line:

Sunday Dinner: Vegetable Lasagna / Baked Fish / Baked Chicken Breast

Monday Lunch: Vegetarian Hamburger w/o cheese / Baked Fish / Baked Chicken Breast

Monday Dinner: Vegetarian Salisbury Steak - Baked Fish - Baked Chicken Breast

Tuesday Lunch: Vegetarian Meat Rib-let - Baked Fish - Baked Chicken Breast

Tuesday Dinner: Vegetable Lasagna - Baked Fish - Baked Chicken Breast

Wednesday Lunch: Vegetarian Hamburger w/o cheese - Baked Fish - Baked Chicken Breast

Wednesday Dinner: Vegetarian Salisbury Steak - Baked Fish - Baked Chicken Breast

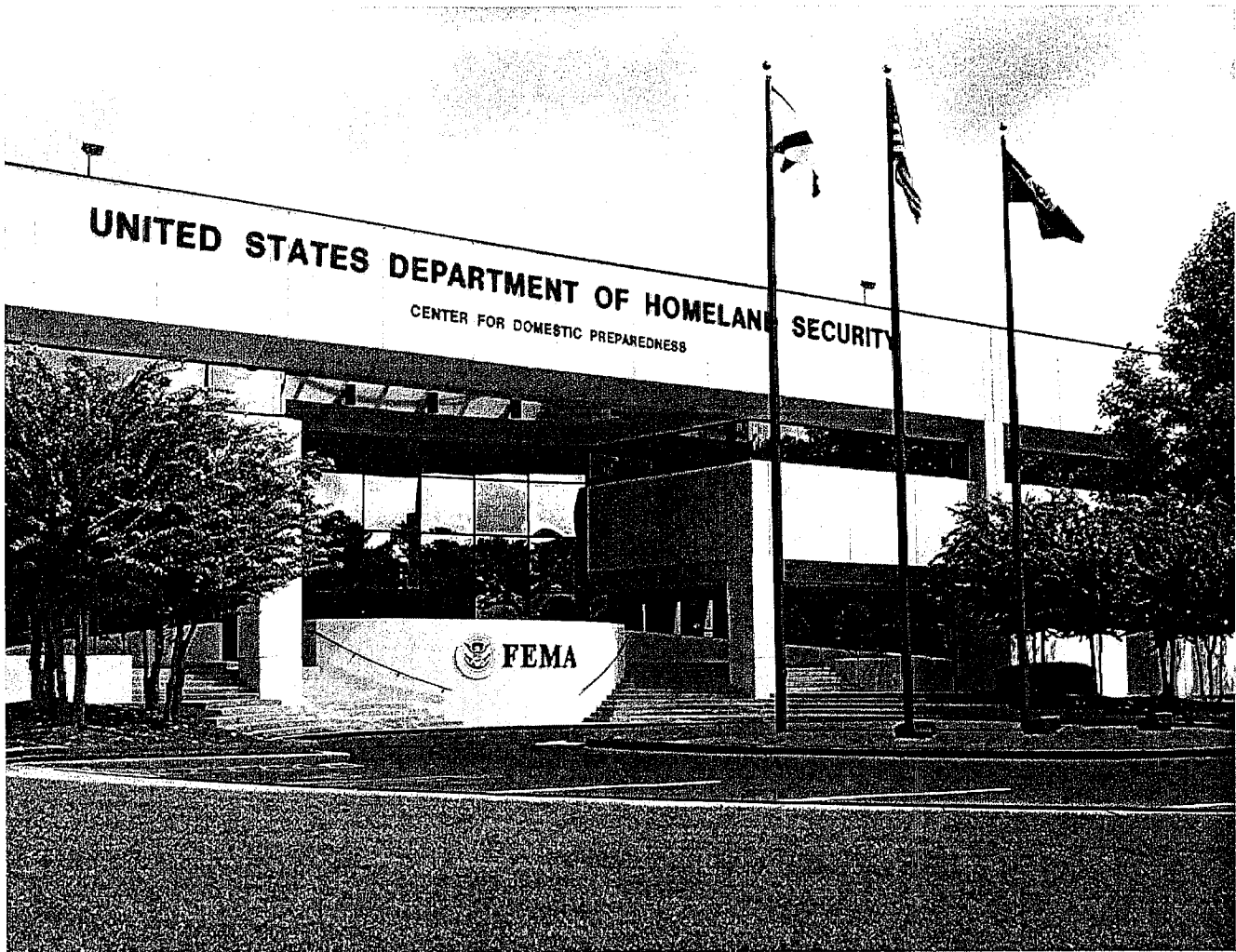
Thursday Lunch: Vegetarian Meat Rib-let - Baked Fish - Baked Chicken Breast

Thursday Dinner: Vegetable Lasagna - Baked Fish - Baked Chicken Breast

Friday Lunch: Vegetarian Hamburger w/o cheese - Baked Fish - Baked Chicken Breast

Friday Dinner: Vegetarian Salisbury Steak - Baked Fish - Baked Chicken Breast

NAME: _____ CLASS: _____ ARRIVAL DATE: _____
 PLEASE PRINT



**Center for Domestic Preparedness
Student Handbook
2010**



FEMA

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Welcome to the Center for Domestic Preparedness

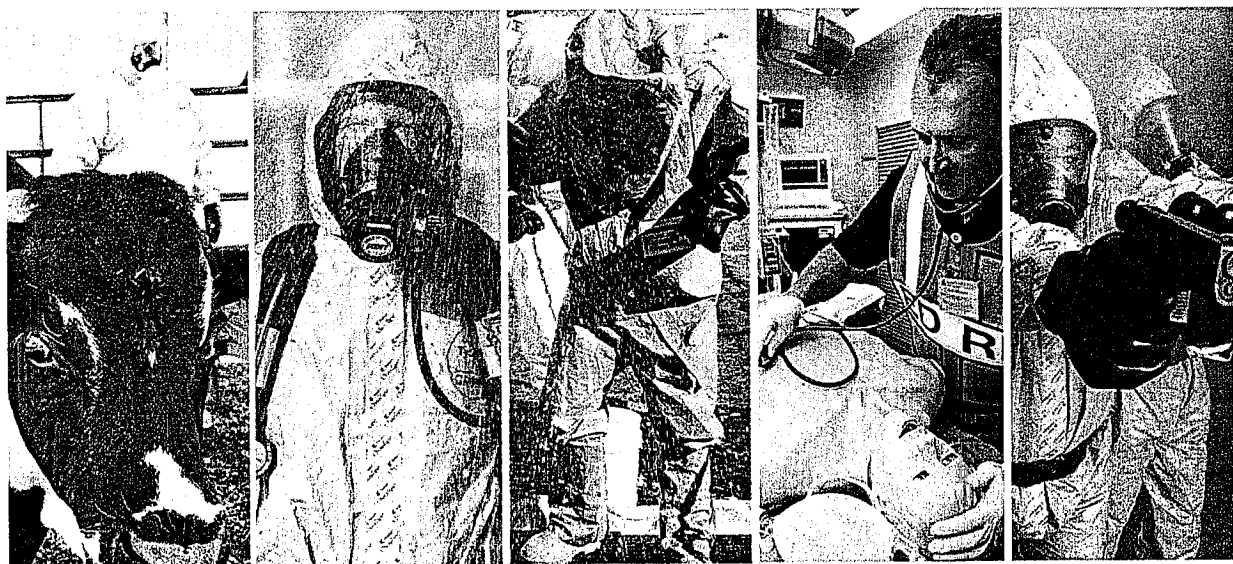
The information provided in this student handbook is designed to help make your travel to and training at the Center for Domestic Preparedness (CDP) as smooth and successful as possible. Even if you have taken classes at the CDP previously, please read this handbook carefully. ***The policies and procedures may have changed since your last training experience; you are responsible for complying with the current policies and procedures.*** We suggest that you provide a copy of the "Emergency Contact Information" located on page 15 to your family and office staff in the event they need to contact you while you are at the CDP.

If you have any questions, you may contact us at (866) 213-9551 or (866) 213-9553.

You may send an email to: StudentServices@cdpemail.dhs.gov

If you need to fax information to the Student Services office please note the following fax numbers:

(256) 231-5555 or (256) 847-2222



FEMA

Center for Domestic Preparedness

P.O. Box 5100

Anniston, AL 36205

TRAVEL

BY AIR:

The majority of flight arrangements are scheduled using electronic tickets (e-tickets). You will not have a traditional hard copy ticket, but you will have a flight confirmation sheet which contains your travel information (flight number, departure time, departure location, etc.) Upon arrival in Atlanta and after locating your luggage at the baggage claim terminal, please proceed to the South Baggage Claim Terminal where a CDP Student Services representative will be awaiting your arrival. They will be located at the “window side” of Baggage Carousel 5 near the entrance to the escalator. The check-in location will be identified by a CDP sign on an easel. **For security purposes be prepared to show two photo ID’s, one of which must be government issued, to the CDP Student Services representative.** PLEASE HAVE YOUR IDENTIFICATION WITH YOU, NOT IN YOUR LUGGAGE! If you do not have the photo ID’s you will not be permitted to board CDP transportation at the airport. Once you have checked in with the CDP Student Services representative, you will be able to place your luggage in a secure holding area and move about the airport until the time of departure. A Student Services representative will remain on-site, prepared to transport late arrivals to the CDP.

If you are a student from a foreign country, please be prepared to show your passport or visa to the CDP Student Services representative at the airport.

NOTE: Federal, Private Sector, and International students are required to make their own flight arrangements and are not authorized to receive reimbursement from the CDP. They are authorized to travel to the Center for Domestic Preparedness on the provided bus transportation at no cost if prior arrangements are made through Student Services.

If your departure location does not have e-tickets available, your prepaid airline ticket will be sent by U.S. Postal Service or other shipping service such as UPS, Fed-Ex, etc., (signature required) the week before your travel date. The ticket provided is the property of the Department of Homeland Security; if unused, this ticket must be returned immediately to the address listed at the bottom of page 2 of the Student Handbook.

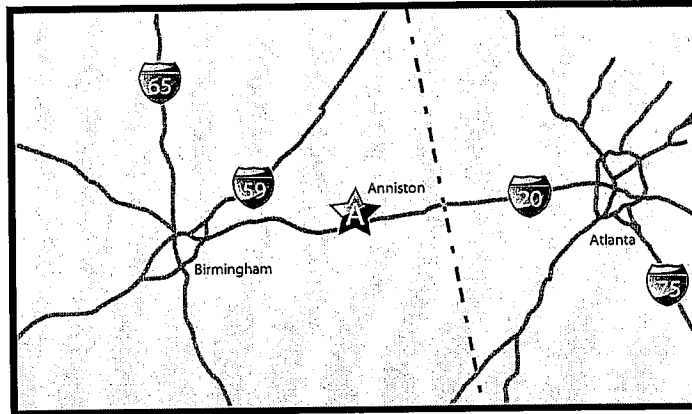
You are not authorized to change your ticket. If a change to your ticket is made by you or your agency, you will be responsible for any additional expenses incurred. Unauthorized changes to your airline ticket may result in significant delays in your transportation from the airport to the CDP. All CDP transportation to and from the airport is scheduled based on the CDP provided airline ticket.

Students who experience ground and/or air travel delays or difficulty in locating CDP Student Services representatives at the airport should contact Student Services at (866) 213-9551 or (256)

847-2072 as soon as possible. Alternative arrangements for transportation will be coordinated once notification is made.

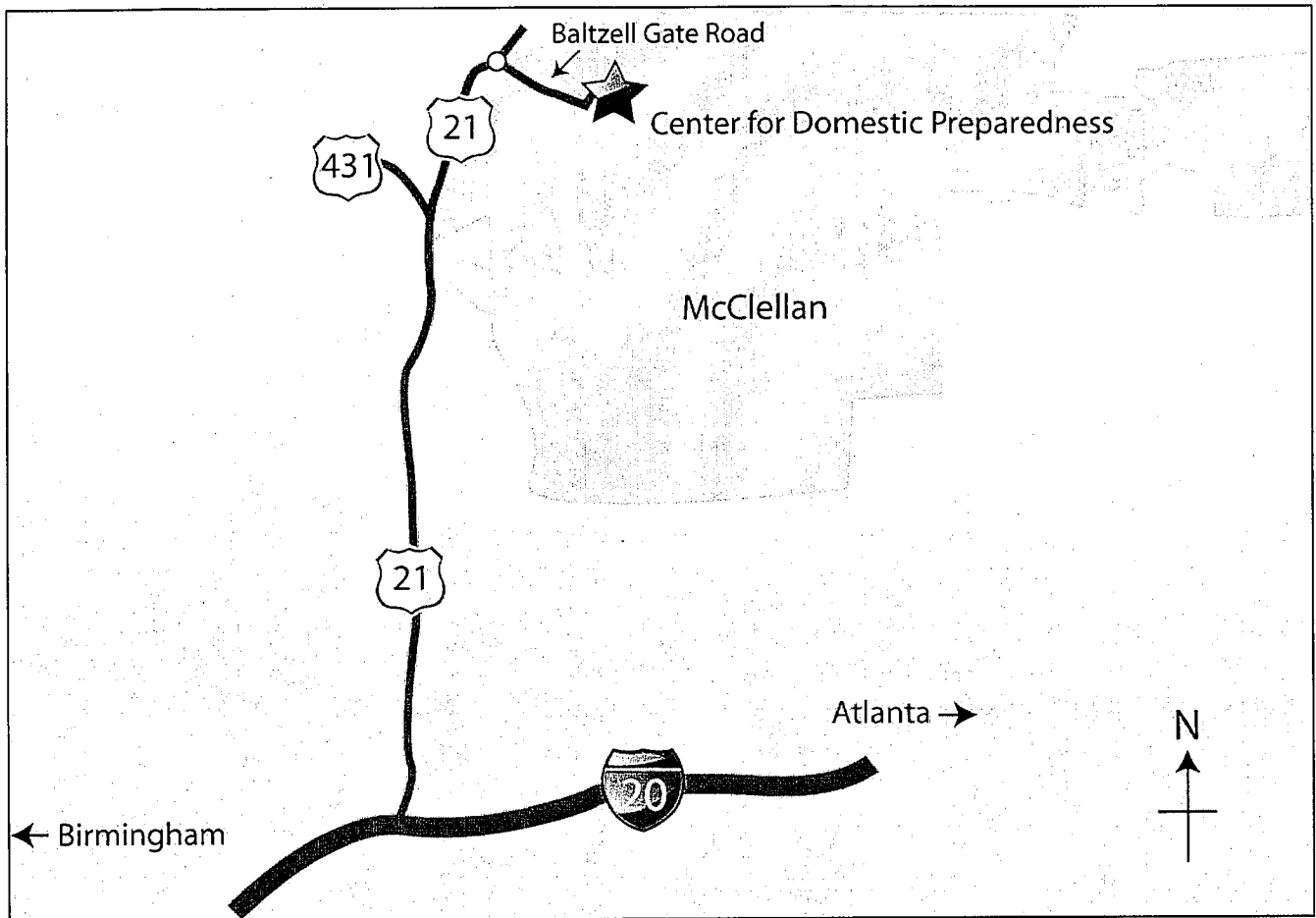
DRIVING TO THE CDP:

The CDP is located in Anniston, Alabama approximately 90 miles west of Atlanta, Georgia and 60 miles east of Birmingham, Alabama, at exit 185 on I-20. Anniston, Alabama is located in the Central Time Zone.



DRIVING DIRECTIONS:

Driving from the direction of Atlanta or Birmingham on I-20 take Exit 185 (AL Hwy. 21 Oxford/Anniston), heading north on AL Hwy. 21 in the direction of Anniston/Jacksonville State University, follow the signs to Fort McClellan. From exit 185 on AL Hwy 21, drive 8.8 miles, turning right onto Baltzell Gate Road.

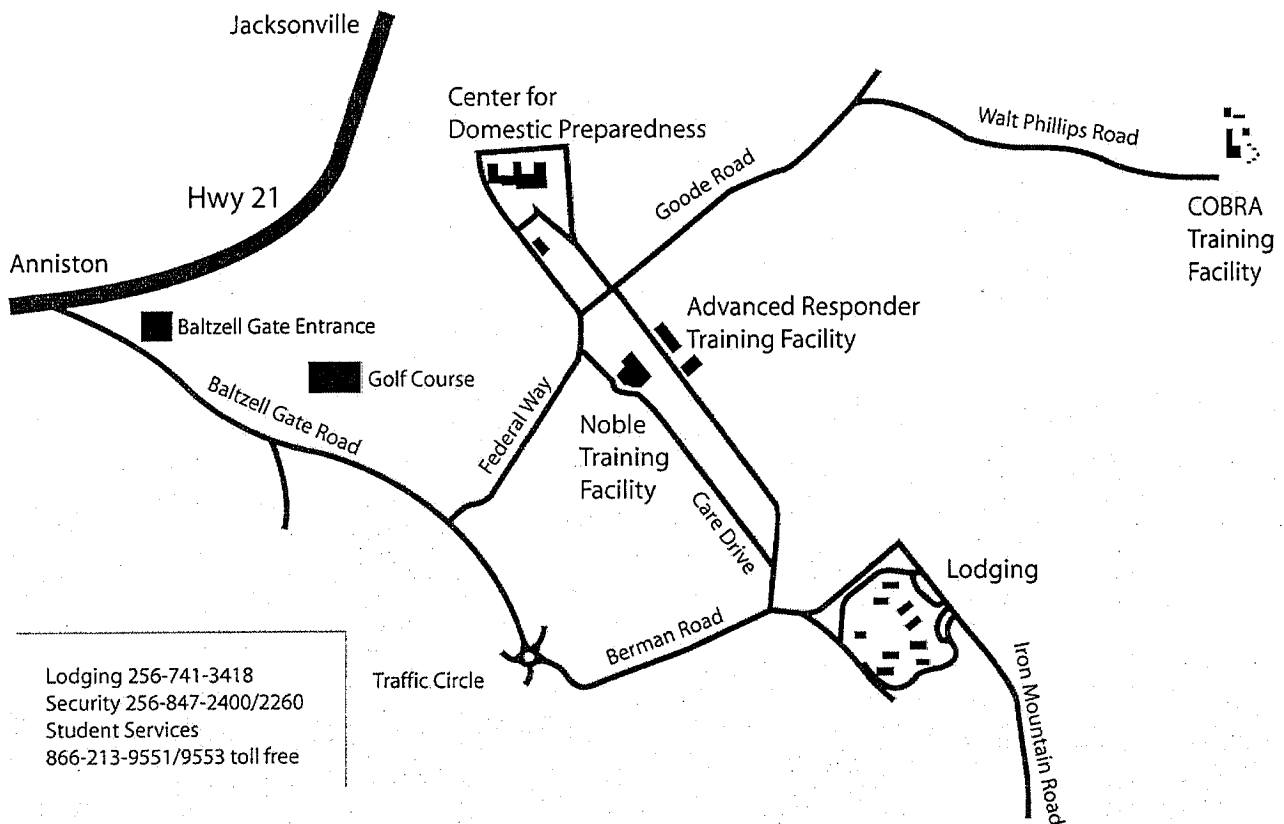


DRIVING DIRECTIONS (continued):

Follow the posted signs 6/10 of a mile to Homeland Security Registration/Lodging, veering left at the fork in the road. Continue on Baltzell Gate Road to the traffic circle. Take the 3rd exit off the traffic circle marked Berman Road. Remain on Berman Road for 1 mile, multiple roads fork off, remain on Berman Road following the DHS Registration signs to Iron Mountain Road, turn right. From Iron Mountain road the entrance is 2 blocks ahead, marked by a blue sign, "Center for Domestic Preparedness, Responder Hospitality Hall." A Security Officer will greet you at the gate and verify your identification. Once entrance has been gained proceed to the CDP Hospitality Desk in Building 320.

[illegible]

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NOTE: If you experience any difficulties (car trouble, traffic problems, etc.) contact CDP Student Services at (866) 213-9551 or (256) 847-2072 as soon as possible.

POLICIES

ATTENDANCE:

You are required to be present for all sessions of the course you are attending.

SUBSTITUTION:

A substitute student for a CDP course(s) is made on a case by case basis; a seat does not belong to an organization.

A request to consider an equally qualified student must be accompanied by a completed CDP Training Application. The application **must be** submitted for signature through the appropriate State Training Office, State Administrative Agency (SAA) or designee.

LODGING:

Dormitory lodging is provided on-site. Each room includes a full-size bed, telephone and in-room coffee service, television and clock radio with an adjoining shared bathroom. Daily

housekeeping service is provided. Your room and amenities are provided at no cost to you or your agency. A closet key is available and may be obtained from the Hospitality Desk (Building 320) if you have valuables you wish to have secured in your room.

Note: Federal, Private Sector and International students are required to pay for the room.

Free use of internet access terminals is available and located on the first floor common areas of Dormitory Buildings 17, 19, 21, 171, 277 and the Hospitality Desk. Please note that computers provided for use by students are federal property and must be used in accordance with federal regulations. Access to web sites of an adult nature or criminal activity is strictly prohibited. WIFI is available throughout the lodging complex at no charge to the student.

MEALS:

The CDP Dining Facility is located in Building 17. The Dining Facility offers a wide selection of breakfast and dinner entrees. The meal schedule is listed below (class events may require modification to this schedule):

Breakfast	5:30 A.M. - 7:30 A.M.
Lunch	At the training site
Dinner	5:30 P.M. - 7:30 P.M.

Meals and snacks are provided to all state, tribal, and local students at no cost.

Federal and all other students will be issued a meal card. You will only pay for meals that are consumed. Breakfast \$9.00; Lunch \$10.00; Dinner \$15.00.

FIREARMS:

All firearms are prohibited on the CDP campus. Due to heightened security requirements, security and law enforcement personnel may search you, your vehicle, or your luggage. For your own protection, and to expedite your processing into the CDP, **do not bring weapons of any kind to the CDP campus.** Weapons include knives with blades longer than 3 inches, bow & arrows, ammunition, rifles, shotguns, pistols, etc. **If you arrive at the CDP with weapons of any kind without prior written approval, your entry to campus will be denied.**

LOCAL TRANSPORTATION:

Local transportation is provided to and from all training areas and support facilities on a scheduled basis. CDP Student Services operates a shuttle service from 5:00 p.m. until 10:00 p.m., Sunday through Friday for activities within a 15 mile radius of the CDP. **Last pick-up will be at 9:30 p.m. for return to the lodging area.** The telephone number to a local taxi service is

provided on the back of each student badge, and the cost of using a taxi service is the responsibility of the student.

Emergency transportation requests should be directed to the CDP Student Services representative as soon as the requirement is known. Student Services will coordinate your emergency transportation and appropriate airline reservations.

MILEAGE:

Privately owned vehicle drivers are authorized reimbursement at the current authorized mileage rate, per Federal Travel Regulation 301-10.303, up to the equivalent cost of airfare from your residence. Mileage in and around the CDP is not reimbursable. Passengers will not receive mileage reimbursement. If you travel in an agency vehicle (city, county, state or tribal) you will not be reimbursed for mileage. Federal, Private Sector, and International students are not authorized to receive mileage reimbursement from the CDP.

Authorized travel days are the FIRST and LAST day of the training program. Your training dates are reflected on the General Release Agreement.

CONDUCT:

Please remember that while attending training, you are a professional representing your agency and are expected to maintain the highest standards of conduct during both training and leisure time.

SMOKING:

Smoking in Federal facilities is prohibited. Each building has a designated outdoor smoking area.

ILLEGAL DRUG USE:

Illegal drug use is prohibited at the CDP.

ALCOHOLIC BEVERAGES:

The minimum age for consumption of alcoholic beverages in Alabama is 21 years of age. There is no exception to this law at the CDP. Consumption of alcoholic beverages (beer and wine only, no liquor) is limited to the Recovery Zone and individual dormitory rooms. Personal quantities of beer and wine only are allowed in individual dormitory rooms. "Drinking" parties and open containers of alcoholic beverages are prohibited in any common or outdoor areas in the lodging complex. The CDP reserves the right to either limit or refuse the purchase of alcoholic beverages to patrons of the Recovery Zone.

SUPERINTENDENT'S POLICY - SAFETY: (Summary)

Nothing is worth the accidental loss of a life, personal injury, damage to personal or government property or destruction of the environment. Risk management must be fully integrated into all training. The basis for achieving a safe working/training environment is a partnership between you, your fellow students, and the CDP staff. Safety is always our number one priority. While attending courses at the CDP, remain mindful of your environment and actions.

EVACUATION/SHELTER IN-PLACE PLANS:

Classrooms: Evacuation/shelter in-place plans are posted in all classrooms. Follow the instructions of the staff and/or the posted plan.

Lodging: The evacuation/shelter in-place plans are posted in your room and should be reviewed upon check-in. The Lodging area has fire alarms and smoke detectors installed. If you hear the fire alarm or weather siren, follow the instructions on the posted plan.

Training Facilities: Evacuation/shelter in-place plans are posted in all training facilities. Follow the instructions of the staff and/or the posted plan.

SUPERINTENDENT'S POLICY- EQUAL OPPORTUNITY: (Summary)

The Center has a zero tolerance policy for any behavior or discrimination that violates Title VII of the Civil Rights Act of 1964. Professionals at all levels are responsible for setting the example in maintaining an environment which is free from harassment based on gender, race, color, religion, national origin, age, disability, and sexual orientation. Each individual should be able to work/train in an atmosphere unobstructed by discrimination, intimidation, or harassment and such conduct will not be tolerated. All complaints of harassment will be investigated promptly and impartially.

SUPERINTENDENT'S POLICY - VIOLENCE IN THE WORKPLACE: (Summary)

All professionals must focus their efforts on providing an environment free from violence, threats of violence, harassment, intimidation, or other disruptive behavior. The staff of the CDP will maintain open communication with all personnel and foster an atmosphere of care and concern. Staff members and students should be alert for behavior patterns which could lead to violence. All reports of violence or potential violence will be taken seriously and will be dealt with appropriately. Any student who jeopardizes the safety of the training environment through hostile language or acts will be removed from training and returned to their jurisdiction without receiving credit for attendance and training. The student will also be prohibited from attending future CDP training.

TRAINING ATTIRE:

Training attire is casual for the duration of the course. When attending CDP classes, it is each participant's responsibility to use good judgment in selecting attire that projects a professional image and is appropriate for both the local climate and classroom activities. Classroom sessions will be held in climate controlled buildings. During outdoor training, students should consider wearing durable clothing relevant to the training environment. Agency-prescribed dress or uniform is acceptable for training. Slacks and jeans are recommended for all hands-on (lanes) training. Flip flops, sandals and tank tops are not permitted.

If CDP staff determines that a participant's attire is inappropriate, the participant will be required to change into more appropriate clothing before being allowed to continue training.

If you are attending **Field Force Extrication Tactics (formerly known as Protester Devices Course) (PER 202)**, prescribed dress or uniform for class is as follows:

- Appropriate inside/outside weather related training attire. After the first morning, all training is conducted outside.
- Outside attire must include **100% cotton pants** such as tactical/cargo pants and cotton shirt (sparks from cutting tools will cause polyester blends to melt or burn)
- Steel-toed boots
- Cotton T-shirt
- Rain gear (recommended)
- Inexpensive leather gloves, ear and eye protection are provided (students have the option to use their own)

COBRA TRAINING FACILITY:

The Chemical, Ordnance, Biological, and Radiological Agent (COBRA) Training Facility is the Nation's only toxic agent training facility dedicated specifically for civilian emergency response training. The HARM, HT, HOT-B, HOT-I, and TERT courses include exercises in the Northville Training community and the COBRA Training Facility. Those attending these courses should note these additional requirements:

- A pre and post blood draw is **required**.
- Personal hygiene for male students requires a mustache be neatly trimmed and facial hair trimmed to insure the secure seal of the face piece of a solid air purifying respirator.

- Pre-COBRATF briefing includes information on personal clothing, jewelry, etc.
- The training event concludes with each student participating in doff procedures that include gender specific communal showers.
- Student departure from the CDP is authorized only after the post COBRA entry blood draw has been completed the next day or the day after the training and the test results annotated.

PHYSICAL CONDITIONING:

The CDP requires each student to be physically qualified to attend training. Our intent is to prevent undue risk to your health and safety. Due to heat and work conditions in Level A, B, and C personal protective equipment, personal care and awareness are essential. The climate and altitude in Anniston may differ from your home environment. It becomes extremely hot and humid during the summer, and weather is subject to change rapidly during the fall and winter months. Please take this into consideration before any form of strenuous exercise. Exercise safely and remember to hydrate yourself, before, during, and after exercising.

MEDICAL REQUIREMENTS:

In accordance with the medical screening form, the following medical conditions will disqualify student participation in certain portions of hands on training:

- High blood pressure (greater than 150 over 90).
- Facial hair (facial hair that interferes with the sealing surface of the air purifying respirator face piece and the face is NOT allowed). The CDP exceeds the requirements listed in OSHA regulation 29 CFR 1910.134. [29 CFR 1910.134 (g)(1)(A)] & 29 CFR 1910.134, Appendix A, 'Fit Testing Procedures (Mandatory)', point #9.
- Heat injury within 72 hours of the beginning of CDP training.

NOTE: The American National Standards Institute authorizes the wearing of contact lenses in an approved respirator. If you have contact lenses, it is recommended you bring them with you. If you have a prescription insert, please have them in your possession when you arrive. Instructors will determine whether the insert is compatible with CDP provided PPE.

PERSONAL INJURY/ILLNESS:

If you are injured or ill during training, notify the nearest CDP staff member immediately. After duty hours, notify the Hospitality Desk at (256) 741-3418. Your orientation packet contains a list of emergency telephone numbers. Please do not hesitate to call the emergency numbers. There are several hospitals and urgent care facilities in the area: Jacksonville Hospital, Stringfellow Memorial Hospital, and Northeast Alabama Regional Medical Center. If you use prescription

medication, bring an appropriate amount for the duration of your training. Each individual student is responsible for any medical or dental treatment costs incurred. It is recommended you carry your health insurance information with you.

GENERAL CLIMATE INFORMATION:

The CDP is located in Anniston, Alabama, in Calhoun County. Northeastern Alabama generally has a mild climate. Summer months are usually humid, and inclement weather may include thunderstorms and possible tornadoes. Below is a climate table which lists temperature and precipitation averages for the area.

Month	Average High	Average Low	Average Precipitation	Rain/Snow Days
January	52.1 F	31.9 F	5.10 inches	11 days
February	57.4 F	34.9 F	4.72 inches	10 days
March	66.1 F	42.3 F	6.19 inches	11 days
April	74.8 F	49.5 F	4.96 inches	9 days
May	81.2 F	58.0 F	4.85 inches	10 days
June	87.5 F	65.6 F	3.73 inches	10 days
July	90.2 F	69.7 F	5.25 inches	12 days
August	89.5 F	69.0 F	3.59 inches	10 days
September	84.2 F	63.1 F	3.93 inches	8 days
October	74.8 F	50.7 F	2.81 inches	6 days
November	64.3 F	41.6 F	4.33 inches	9 days
December	55.9 F	35.3 F	5.12 inches	11 days

COURSE CONTINUING EDUCATION UNITS:

All CDP courses are issued Continuing Education Units through the International Association for Continuing Education & Training (IACET).

Additional credit may be awarded based on course and profession for:

- Physicians, and other healthcare professionals, may be awarded CMEs through the University of Alabama (ACCME)
- Nurses are awarded CEUs through the Alabama Board of Nursing (ABN)
- Law Enforcement Officers may be awarded POST credit, (some states have special provisions) check with CDP Registrar
- EMT's and Paramedics may receive CEUs from the Continuing Education Coordinating Board for EMS (CECBEMS)
- Veterinarians and Veterinarian Technicians are awarded CEUs through Auburn University
- Environmental Health Professionals may be awarded CEUs through the National Environmental Health Association (NEHA)

TRAINING TRANSCRIPTS:

Transcripts are available upon request. Call 1-866-213-9551 or send an email to:
StudentServices@cdpemail.dhs.gov

FITNESS FACILITIES:

The Truman Gym and McClellan Fitness Center are available for all students at minimal cost. Further information is available at the CDP Hospitality Desk, Building 320. The facilities are owned and operated by the City of Anniston. The facilities are open daily until 9:00 p.m. The following activities are available:

Truman Gym

Heated indoor pool
Racquetball
Sauna
Nautilus room
Free weight room
Basketball

Fitness Center

Nautilus
Sauna
Sauna-Vibe Massage
Cardio room
Free weights

CONTACT INFORMATION

PERSONAL MAIL:

Due to the short duration of CDP courses, personal mailboxes are not available. A CDP Student Services representative can post outgoing mail for you. If the receipt of personal mail is absolutely necessary, it should be sent to:

Center for Domestic Preparedness

ATTN: Student Name

Course Name/Number

P.O. Box 5100

Anniston, AL 36205

OFFICIAL TELEPHONE CALLS:

Telephones are available for official calls only. Official calls should be coordinated with a CDP Student Services representative.

PERSONAL TELEPHONE CALLS:

Personal telephone calls are made at your expense. If circumstances require an immediate emergency call, notify a CDP Student Services representative. Lodging rooms are equipped with telephones for both incoming and outgoing personal telephone calls. Outgoing long distance calls must be billed to an 800 service, calling card or credit card. Emergency messages may be received at the following numbers:

Monday-Friday	7:30 am-4:30 pm
Student Services	(866) 213-9551 or (256)847-2072
Operations Coordinator	(256) 847-2332
24 Hours	(256) 741-3418 (Hospitality Desk)

BANKING FACILITIES:

There is an ATM located at the CDP Hospitality Desk in building 320. A local credit union has an ATM located near the McClellan Post Office, in the McClellan Park Medical Mall parking lot. Numerous other banking institutions are in the local area.

CDP Emergency Contact Information

Telephone: 866-213-9551 or 866-213-9553

FAX: 256-231-5555 /256-847-2222

Email: StudentServices@cdpemail.dhs.gov

ADDRESS:

Center for Domestic Preparedness

61 Responder Drive

Anniston, AL 36205

256-847-2400 Security (24 hrs)

256-847-2260/2261 Lodging Security (24 hrs)

This publication provided by the

Center for Domestic Preparedness

P.O. Box 5100

Anniston, AL 36205-5100